

**CONTRACT #9**  
**RFS # 343.52-677**

**Department of Health**

**VENDOR:**  
**Ceridian Corporation**



STATE OF TENNESSEE  
DEPARTMENT OF HEALTH  
CORDELL HULL BLDG.  
425 5TH AVENUE NORTH  
NASHVILLE TENNESSEE 37247

RECEIVED

MAY 30 2007

FISCAL REVIEW

PHIL BREDESEN  
GOVERNOR

SUSAN R. COOPER, MSN, RN  
COMMISSIONER

**MEMORANDUM**

TO: M. David Goetz, Jr., Commissioner, Department of Finance and  
Administration  
James W. White, Executive Director, Fiscal Review Committee

FROM: Susan R. Cooper, MSN, RN Commissioner, Department of Health *SR*

DATE: May 25, 2007

SUBJECT: Non-Competitive Contract Amendment Request

We are requesting approval to execute a Non-Competitive Amendment to the Ceridian Corporation contract for the Tennessee Tobacco Quitline. This grantee was selected to provide these services from applications written under RFP guidelines. The beginning date of this contract is June 30, 2006. This amendment will extend this contract until June 29, 2008. The start date of this amendment, June 30, 2007, will be less than 60 days after receipt of this non-competitive amendment request.

The Tennessee Tobacco Quitline is a statewide toll free dial-in telephone service to assist tobacco users to quit by providing intake and assessment, brief intervention, and proactive counseling in both English and Spanish. The quitline serves as the state's access line for cessation information, tobacco use counseling, and referral to local resources. The Tennessee Tobacco Quitline is the only service of this kind provided by the state and it is in the state's best interest to continue this service without interruption.

We will be happy to provide you with any additional information needed to evaluate and approve this request. Thank you for your consideration regarding this request.

cc: Cathy R. Taylor

# REQUEST: NON-COMPETITIVE AMENDMENT

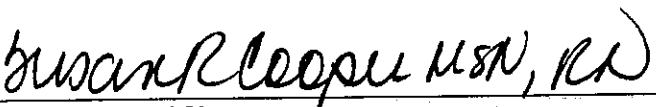
APPROVED

Commissioner of Finance &amp; Administration

Date:

EACH REQUEST ITEM BELOW MUST BE DETAILED OR ADDRESSED AS REQUIRED.

1) RFS #	343.52-677- <del>00</del> b7	
2) State Agency Name :	DEPARTMENT OF HEALTH	
<b>EXISTING CONTRACT INFORMATION</b>		
3) Service Caption :	TOBACCO QUITLINE SERVICES	
4) Contractor :	CERIDIAN CORPORATION	
5) Contract #	FA-06-16851-02	
6) Contract Start Date :	June 30, 2006	
7) <u>Current</u> Contract End Date IF <u>all</u> Options to Extend the Contract are Exercised :	June 30, 2011	
8) <u>Current</u> Total Maximum Cost IF <u>all</u> Options to Extend the Contract are Exercised :	\$1,066,702	
<b>PROPOSED AMENDMENT INFORMATION</b>		
9) <u>Proposed</u> Amendment #	Three	
10) <u>Proposed</u> Amendment Effective Date : (attached explanation required if date is < 60 days after F&A receipt)	June 30, 2007	
11) <u>Proposed</u> Contract End Date IF <u>all</u> Options to Extend the Contract are Exercised :	June 30, 2011	
12) <u>Proposed</u> Total Maximum Cost IF <u>all</u> Options to Extend the Contract are Exercised :	\$1,066,702	
13) Approval Criteria : (select one)	<input checked="checked" type="checkbox"/> use of Non-Competitive Negotiation is in the best interest of the state <input type="checkbox"/> only one uniquely qualified service provider able to provide the service	
14) Description of the Proposed Amendment Effects & Any Additional Service :		
This Amendment is requested in accordance with the State's option to amend to extend the contract based on the contractor's satisfactory provision of service.		

<b>15) Explanation of Need for the Proposed Amendment :</b>	
Amendment for contract extension shall provide for continuation and continuity of service for the citizens of Tennessee who commit to quit smoking by providing support and resources to support their efforts to stop use of tobacco products	
<b>16) Name &amp; Address of Contractor's Current Principal Owner(s) :</b> (not required if proposed contractor is a state education institution)	
Zachary Meyer, Senior Vice President, 3311 East Old Shakopee Road, Minneapolis, MN 55425	
<b>17) Documentation of Office for Information Resources Endorsement :</b> (required <u>only</u> if the subject service involves information technology)	
select one:	<input checked="checked" type="checkbox"/> Documentation Not Applicable to this Request <input type="checkbox"/> Documentation Attached to this Request
<b>18) Documentation of Department of Personnel Endorsement :</b> (required <u>only</u> if the subject service involves training for state employees)	
select one:	<input checked="checked" type="checkbox"/> Documentation Not Applicable to this Request <input type="checkbox"/> Documentation Attached to this Request
<b>19) Documentation of State Architect Endorsement :</b> (required <u>only</u> if the subject service involves construction or real property related services)	
select one:	<input checked="checked" type="checkbox"/> Documentation Not Applicable to this Request <input type="checkbox"/> Documentation Attached to this Request
<b>20) Description of Procuring Agency Efforts to Identify Reasonable, Competitive, Procurement Alternatives :</b>	
RFP Award -Contract Amendment for extension of contract term	
<b>21) Justification for the Proposed Non-Competitive Amendment :</b>	
RFP Award -Contract Amendment for extension of contract term	
<b>REQUESTING AGENCY HEAD SIGNATURE &amp; DATE :</b> ( <u>must</u> be signed & dated by the <u>ACTUAL</u> procuring agency head as detailed on the Signature Certification on file with OCR— signature by an authorized signatory will be accepted only in documented exigent circumstances)	
 Agency Head Signature	5/29/07 Date



STATE OF TENNESSEE  
**DEPARTMENT OF HEALTH**  
CORDELL HULL BUILDING  
425 5TH AVENUE NORTH  
NASHVILLE, TENNESSEE 37247

**MEMORANDUM**

TO: Ben Riley

FROM: Dean Daniel

DATE: May 25, 2007

SUBJECT: Contract Amendment # 3, Ceridian Corporation, Tennessee Tobacco Quitline Services, RFS #343.52-677.06, June 30, 2006/June 29, 2008

The Department Of Health entered into a contract with the Ceridian Corporation to establish and maintain the Tennessee Tobacco Quitline with an effective date of June 30 2006. The Ceridian Corporation was selected to provide these services from vendors who applied to the state under Request for Proposal (RFP) guidelines. The Tennessee Tobacco Quitline is a statewide toll free dial-in telephone service to assist tobacco users to quit by providing intake and assessment, brief intervention, and proactive counseling in both English and Spanish. The quitline serves as the state's access line for cessation information, tobacco use counseling, and referral to local resources.

During state fiscal year 2006-2007 this contract was amended twice. The first amendment updated language in the scope of services, set forth dates for milestones and established reimbursement amounts for milestones reached. The second amendment changed the name of the original vendor from The Mulvihill Group d/b/a Leade Health, Incorporated to the Ceridian Corporation.

Amendment # 3 is now being submitted. This amendment will add language in the scope of services relative to required reports and establishes dates for reporting requirements. This amendment also adds an additional \$303,087 state funding for the quitline and extends the date of the contract from June 30, 2006 to June 29, 2008.

This amendment is being submitted outside the 60 day timeframe as required by the Department of Finance and Administration. Program staff inadvertently overlooked the processing of this amendment and did not realize this contract had to be amended, at least on an annual basis, since the end date of the RFP is June 30, 2011. Program staff in the Community Medical Services Tobacco Program had not previously processed an

amendment to a contract written under a Request for Proposal when extending the date of the contract and adding additional funding as well. It took sometime for the program staff to pull together the information needed to process this type of amendment in accordance with established contract guidelines, Therefore, this contract amendment was not prepared and submitted within the 60 day requirement.

The contractor has not been authorized to commence work on the scope of services after June 29, 2007, and understands that an executed contract has to be in place before work can begin. No other reimbursement is due to this contractor other than that as authorized in the original contract, with amendments # 1 and 2.

The Tobacco Program staff and staff from the Bureau of Health Services have been in contact with the contractor and the Department's Office of Contract Review regarding the late submission of this contract and have urged the expediting and approval of this contract amendment so this vital service can continue to be provided to the citizens of Tennessee without interruption.

cc: Leslie Humphreys  
Alisa Malone  
Jessie Reid

# **TDOH CONTRACT PROCESSING WORKSHEET**

Today's Date April 23, 2007/5-11-07/5-14-07

Program Submitting Contract : Tobacco Program

Contract Tracking# **2007-05-11-005**

Program Contact : Donna Henry Phone# 615-253-5800

Prior Contract # FA-06-16851-02

CONTRACT TERM: June 30, 2006 Through June 29, 2008

Prior RFS #343.52-677-06 formerly 2006-06-05-001

<b>Check One</b>	
New	<input type="checkbox"/>
Renewal	<input type="checkbox"/>
<b>Check One</b>	
Amend # <u>3</u>	<input checked="" type="checkbox"/>
Revenue	<input type="checkbox"/>
DPA	<input type="checkbox"/>
DGA	<input type="checkbox"/>
NC	<input type="checkbox"/>
Other	<input type="checkbox"/>

Contractor: **CERIDIAN CORPORATION**

Fed ID# **V41-1981625-00**

Authorized Signer's Name and Title: Zachary Meyer, Senior Vice President

Phone# (952) 853-3301

Fax# (952) 853-5270

Contractor Address: 3311 East Old Shakopee Road.

E-Mail: Zachary.Meyer@ceridian.com

City, State & Zip: Minneapolis, MN 55425-1640

Brief Description of Service: Tennessee Tobacco Quitline Service

Service Area County Code: Statewide Vendor Registered in SPRS: Yes: ☒ No ☐

Does State need Business Associate Agreement with Contractor? Yes ☒ No ☐

Statewide	<input checked="" type="checkbox"/>
Out of State	<input type="checkbox"/>
Out of Country	<input type="checkbox"/>

Procurement Method: \* **Competitive (attach documentation)** \* **Non-Competitive (attach justification)**

Funding	TOTAL CONTRACT AMOUNT	CURRENT YEAR AMOUNT	PRIOR AMOUNT	AMOUNT OF DIFFERENCE	For Multiple	
					AC/CC	\$
Contract Amount	\$737,821		\$434,734	\$303,087	343.	
Personnel Expenses	0		0	0	343.	
Total State Funding	\$331,716		\$195,630	\$136,086	343.	
Total Federal Funding Type: CFDA# Type: 93.283	\$ 406,105		\$239,104	\$167,001	343.	
Total Other Funding Type:					Contract to Vendor	Date:
Allot. Code & CC	343.52-150		343.52-150		Vendor to Bureau	Date:
Number of Positions	0		0		Bureau to DCR	Date:

Review/Approvals:	Name	Initials	Date
Program Contract Developer:	Jessie Reid	JR	5/11/07
Section/Regional Director:	Alisa Malone	AMM	5/11/07
Bureau Budget:	<i>Cristina Alford</i>	<i>ACA</i>	5/23/07
Bureau Contact: <i>X MW5/23/07</i>	<i>Christy Williams</i>	<i>ctw</i>	5-17-07
Bureau Director:	<i>Dr. Cathy Taylor</i>	<i>CTD</i>	5-24-07

Legal: \_\_\_\_\_

BAS Funds Certification & Budget: \_\_\_\_\_

BAS Contract Review: \_\_\_\_\_

BAS Assistant Commissioner: \_\_\_\_\_

# CONTRACT SUMMARY SHEET

021406

<b>RFS#</b>	<b>Contract#</b>
<b>343.52-677-07</b>	<b>FA-06-16851-03</b>
<b>State Agency</b>	<b>State Agency/Division</b>
TENNESSEE DEPARTMENT OF HEALTH	HEALTH SERVICES ADMINISTRATION
<b>Contractor Name</b>	<b>Contractor ID# (FEN or SSN)</b>
Ceridian LifeWorks d/b/a LEADE HEALTH, INC.	<input type="checkbox"/> C- or <input checked="" type="checkbox"/> V- 41-1981625-00

<b>Service Description</b>			
TOBACCO QUITLINE			
<b>Contract BEGIN Date</b>	<b>Contract END Date</b>	<b>Subrecipient or Vendor?</b>	<b>CFDA#</b>
June 30, 2006	June 29, 2008	Vendor	93.283

<b>Mark Each TRUE Statement</b>	
<input checked="" type="checkbox"/> Contractor is on STARS	<input checked="" type="checkbox"/> Contractor's Form W-9 is on file in Accounts

Allowment Code	Cost Center	Object Code	Fund	Funding Grant Code	Funding Subgrant Code
343.52	150	139	11		
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount
2007	\$ 195,630.00	\$ 239,104.00			\$ 434,734.00
2008	\$ 136,086.00	\$ 167,001.00			\$ 303,087.00
					\$ -
					\$ -
					\$ -
					\$ -
<b>TOTAL</b>	\$ 331,716.00	\$ 406,105.00	\$ -	\$ -	\$ 737,821.00

<b>COMPLETE FOR AMENDMENTS ONLY</b>			<b>State Agency Fiscal Contact &amp; Telephone #</b>
<b>FY</b>	<b>Base Contract &amp; Prior Amendments</b>	<b>THIS Amendment ONLY</b>	CRYSTAL ALLEN (615) 741-9419
2007	\$ 434,734.00	\$ -	<b>State Agency Budget Officer Approval</b>
2008		\$ 303,087.00	
<b>Funding Certification</b> (certification required by 49 C.F.R. § 9.4-5.113, that there is a balance in the appropriation from which the obligated expenditure is required to be paid that is not otherwise encumbered to pay obligations previously incurred)			
<b>TOTAL</b>	\$ 434,734.00	\$ 303,087.00	
<b>End Date</b>	6/30/2007	6/29/2008	

<b>Contractor Ownership</b> (complete only for base contracts with contract # prefix FA or GR)			
<input type="checkbox"/> African American	<input type="checkbox"/> Person w/ Disability	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Small Business <input checked="" type="checkbox"/> NOT disadvantaged
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input type="checkbox"/> OTHER minority/disadvantaged—

<b>Contractor Selection Method</b> (complete for ALL base contracts—N/A to amendments or delegated authorities)			
<input type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation	<input type="checkbox"/> Alternative Competitive Method	
<input checked="" type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Negotiation w/ Government (eg, ID, GG, GU)	<input type="checkbox"/> Other	

<b>Procurement Process Summary</b> (complete for Alternative Method, Competitive Negotiation, Non-Competitive Negotiation, OR Other)
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The Grantee was originally selected based upon it's reponse to a Request for Proposal (RFP) issued by the Department of Health for Tobacco Quitline Services.



Contract Number							
Fiscal Year		2007					
Allotment Code	Cost Center	Object Code	Fund	Grant Code	Subgrant Code	CFDA #	Amount
343.52	150	139	11			93.283	\$239,104.00
343.52	150	139	11				\$195,630.00
TOTAL							\$434,734.00

**CONTRACT SUMMARY SHEET SUPPLEMENT**

<b>Contract Number</b>							
<b>Fiscal Year</b>		2008					
<b>Allotment Code</b>	<b>Cost Center</b>	<b>Object Code</b>	<b>Fund</b>	<b>Grant Code</b>	<b>Subgrant Code</b>	<b>CFDA #</b>	<b>Amount</b>
343.52	150	139	11			93.283	\$167,001.00
343.52	150	139	11				\$136,086.00
<b>TOTAL</b>							\$303,087.00

**AMENDMENT THREE  
TO CONTRACT NUMBER FA-06-16581-00**

This Contract, by and between the State of Tennessee, Department of Health, hereinafter referred to as the State and Ceridian Corporation, hereinafter referred to as the Contractor, is hereby amended as follows:

1. Add the following as Section A.13., for the period June 30, 2007 through June 29, 2008, and renumber subsequent clauses as necessary:

A.13. Submit first progress activity report in a format approved by the State from June 30, 2007 through September 30, 2007, due no later than October 15, 2007, which at a minimum shall include the following information. (Submission of progress activity reports due by October 15, in a subsequent contract period or periods is contingent on contract extension referenced in section B.2. of this Contract.)

- a. call volume (operations) and clients served, including self-referred callers (tobacco users, recent quitters, professionals, and proxies).
- b. types and amounts of services provided (e.g., referral to local resources, amount type of material distributed).
- c. caller demographics and other client characteristics information obtained at intake/assessment.
- d. client outcomes (quit attempts, consumption reduction).
- e. operations, including call patterns by time of day, day of week and month; waiting time for callers.
- f. volume of calls received during times when a live answer is not available, abandonment rates.
- g. other data analysis as requested by the State.

2. Add the following as Section A.14., for the period June 30, 2007 through June 29, 2008, and renumber subsequent clauses as necessary:

A.14. Submit second progress activity report from October 1, 2007 through December 31, 2007, due no later than January 15, 2008, which at a minimum shall include the following information. (Submission of progress activity reports due by January 15, in a subsequent contract period or periods is contingent on contract extension referenced in section B.2. of this Contract.)

- a. call volume (operations) and clients served, including self-referred callers (tobacco users, recent quitters, professionals, and proxies).
- b. types and amounts of services provided (e.g., referral to local resources, amount and type of material distributed).
- c. caller demographics and other client characteristics information obtained at intake/assessment.

PRELIMINARY  
NOT FOR ISSUE

- d. client outcomes (quit attempts, consumption reduction, quit status at 3 months).
  - e. operations, including call patterns by time of day, day of week and month; waiting time for callers.
  - f. volume of calls received during times when a live answer is not available, abandonment rates.
  - g. other data or reporting requests as needed to monitor call volume during media campaigns (e.g. weekly) or for other data analysis.
3. Add the following as Section A.15., for the period June 30, 2007 through June 29, 2008, and renumber subsequent clauses as necessary:
- A.15. The Contractor shall submit semi-annual report from June 30, 2007 through December 31, 2007, due no later than January 31, 2008 on continuous quality improvement, including recommendations for changes or adjustments in Tennessee quitline protocols, processes, materials, operations or evaluation and identification of any obstacles to the effectiveness of the program; e.g. year to date comparison data, trends, breakdowns by counties, insurance status. (Submission of semi-annual reports due by January 15 in a subsequent contract period or periods is contingent on contract extension referenced in section B.2. of this Contract.)
4. Add the following as Section A.16., for the period June 30, 2007 through June 29, 2008, and renumber subsequent clauses as necessary:
- A.16. Submit third progress activity report from January 1, 2008 through March 31, 2008, due no later than April 15, 2008, which at a minimum shall include the following information. (Submission of progress activity reports due by April 15, in a subsequent contract period or periods is contingent on contract extension referenced in section B.2. of this Contract.)
- a. call volume (operations) and clients served including self-referred callers (tobacco users, recent quitters, professionals, and proxies).
  - b. types and amounts of services provided (e.g., referral to local resources, amount and type of material distributed).
  - c. caller demographics and other client characteristics information obtained at intake/assessment.
  - d. client outcomes (quit attempts, consumption reduction, quit status at 6 months).
  - e. operations, including call patterns by time of day, day of week and month, and waiting time for callers.
  - f. volume of calls received during times when a live answer is not available, abandonment rates.
  - g. other data or reporting requests as needed to monitor call volume during media campaigns (e.g. weekly) or for other data analysis.
5. Add the following as Section A.17., for the period June 30, 2007 through June 29, 2008, and renumber subsequent clauses as necessary:

A.17. Submit fourth progress activity report from April 1, 2008 through June 29, 2008, due no later than July 15, 2008, which at a minimum shall include the following information. (Submission of progress activity reports due by July 15, in a subsequent contract period or periods is contingent on contract extension referenced in section B.2. of this contract.)

- a. call volume (operations) and clients served, including self-referred callers (tobacco users, recent quitters, professionals, and proxies).
- b. types and amounts of services provided (e.g., referral to local resources, amount and type of material distributed).
- c. caller demographics and other client characteristics information obtained at intake/assessment.
- d. client outcomes (quit attempts, consumption reduction, quit status at 9 months).
- e. operations, including call patterns by time of day, day of week and month; waiting time for callers.
- f. volume of calls received during times when a live answer is not available, abandonment rates.
- g. other data or reporting requests as needed to monitor call volume during media campaigns (e.g. weekly) or for other data analysis.

6. Add the following as Section A.18., for the period June 30, 2007 through June 29, 2008, and renumber subsequent clauses as necessary:

A.18. Submit project Summary report for the period June 30, 2007 through June 29, 2008, due by August 1, 2008, which at a minimum shall include the following information. (Submission of summary reports due by August 1, in a subsequent contract period or periods is contingent on contract extension referenced in section B.2. of this Contract.

- a. call volume (operations) and clients served, including self-referred callers (tobacco users, recent quitters, professionals, and proxies).
- b. types and amounts of services provided (e.g., referral to local resources, amount and type of material distributed).
- c. caller demographics and other client characteristics information obtained at intake/assessment.
- d. client outcomes (quit attempts, consumption reduction, quit status at 12 months).
- e. operations, including call patterns by time of day, day of week and month, and waiting time for callers.
- f. volume of calls received during times when a live answer is not available, abandonment rates.
- g. other data or reporting requests as needed to monitor call volume during media campaigns (e.g. weekly) or for other data analysis.
- h. annual process outcome and impact evaluation of the Tennessee Quitline including continuous quality improvement, recommendations for changes or adjustments in

Tennessee quitline protocols, processes, materials, operations and identification of any obstacles to the effectiveness of the program (e.g. year to date comparison data, trends, breakdowns by counties, insurance status).

7. Delete Section B.1., in its entirety and insert the following in its place:

B.1. Contract Term. This Contract shall be effective for the period commencing on June 30, 2006 and ending on June 29, 2008. The State shall have no obligation for services rendered by the Contractor, which are not performed within the specified period.

8. Delete Section C.1., in its entirety and insert the following in its place:

C.1. Maximum Liability. In no event shall the maximum liability of the State under this Contract exceed Seven Hundred Thirty Seven Thousand Eight Hundred Twenty One Dollars (\$737,821.00). The Service Rates in Section C.3. shall constitute the entire compensation due the Contractor for the Service and all of the Contractor's obligations hereunder regardless of the difficulty, materials or equipment required. The Service Rates include, but are not limited to, all applicable taxes, fees, overheads, and all other direct and indirect costs incurred or to be incurred by the Contractor.

9. Add the following as the Fifteenth Service Unit/Milestone in Section C.3.A., Services Unit/Milestone for the period June 30, 2007 through June 29, 2008.

**A. SERVICE UNIT/MILESTONE**

**AMOUNT**

Submission of first progress activity report – Submitted by October 15, 2007 (see scope A.13.)  
(Amount to be paid upon completion of the milestone - Less 10% retention, per C.9.) Submission of progress activity reports due by October 15, in a subsequent contract period or periods is contingent on contract extension referenced in Section B.2. of this Contract.

\$3,780

10. Add the following as the Sixteenth Service Unit/Milestone in Section C.3.A., Services Unit/Milestone for the period June 30, 2007 through June 29, 2008.

**A. SERVICE UNIT/MILESTONE**

**AMOUNT**

Submission of second progress activity report – Submitted by December 15, 2007 (see scope A.14.)  
(Amount to be paid upon completion of the milestone - Less 10% retention, per C.9.) Submission of progress activity reports due by December 15 in a subsequent contract period or periods is contingent on contract extension referenced in Section B.2. of this Contract.

\$2,700

11. Add the following as the Seventeenth Service Unit/Milestone in Section C.3.A., Services Unit/Milestone for the period June 30, 2007 through June 29, 2008.

**A. SERVICE UNIT/MILESTONE**

**AMOUNT**

Submission of Semi-Annual report – Submitted by  
January 15, 2008 (see scope A.15.)  
(Amount to be paid upon completion of the milestone-  
Less 10% retention, per C.9.) Submission of a semi-annual  
reports due by January 15 in a subsequent contract period  
or periods is contingent on contract extension referenced in  
Section B.2. of this Contract.

\$3,051

12. Add the following as the Eighteenth Service Unit/Milestone in Section C.3.A., Services Unit/  
Milestone for the period June 30, 2007 through June 29, 2008:

**A. SERVICE UNIT/MILESTONE**

**AMOUNT**

Submission of third progress activity report – Submitted by  
April 15, 2008 (see scope A.16.)  
(Amount to be paid upon completion of the milestone - Less 10%  
retention, per C.9.) Submission of progress activity  
reports due by April 15 in a subsequent contract period or  
periods is contingent on contract extension referenced in  
Section B.2. of this Contract.

\$2,700

13. Add the following as the Twentieth Service Unit/Milestone in Section C.3.A., Service Unit/  
Milestone for the period June 30, 2007 through June 29, 2008:

**A. SERVICE UNIT/MILESTONE**

**AMOUNT**

Submission of fourth progress activity report – Submitted by  
July 15, 2008 (see scope A.17.)  
(Amount to be paid upon completion of the milestone -  
Less 10% retention, per C.9.) Submission of progress  
activity reports due by July 15 in a subsequent contract  
period or periods is contingent on contract extension  
referenced in Section B.2. of this Contract.

\$2,700

14. Add the following as the Twenty-First Service Unit/Milestone in Section C.3.A., Service Unit/  
Milestone for the period June 30, 2007 through June 29, 2008:

**A. SERVICE UNIT/MILESTONE**

**AMOUNT**

Submission of project summary report – Submitted by August 1, 2008 (see scope A.18.)  
(Amount to be paid upon completion of the milestone - Less 10% retention, per C.9.) Submission of project summary reports due by August 1 in a subsequent contract period or periods is contingent on contract extension referenced in Section B.2. of this Contract.

\$3,780

15. Add the following as the Twenty-Second Service Unit/Milestone, in Section C.3.B., Services Unit/Milestone, for the period June 30, 2007, through June 29, 2008:

**B. SERVICE UNIT/MILESTONE**

**AMOUNT**

**B. SERVICE**

\$18,298 per month

Monthly operational cost of tobacco quitline June 30, 2007 – June 29, 2008 (Less 10% retention, per C.9.) Monthly payments after June 30, 2007 are contingent on contract extension referenced in Section B.2. of this contract.

16. Add the following as the Twenty-Third Service Unit/Milestone, in Section C.3.B., Services Unit/Milestone for the period June 30, 2007 through June 29, 2008:

**B. SERVICE UNIT/MILESTONE**

**AMOUNT**

**B. SERVICE**

\$5,400 per month

Monthly cost of Media Campaign June 30, 2007 - June 29, 2008 (Less 10% retention, per C.9.) Monthly payments after June 30, 2008 are contingent on contract extension referenced in Section B.2. of this contract.

The other terms and conditions of this Contract not amended hereby shall remain in full force and effect.



**IN WITNESS WHEREOF:**

**CERIDIAN CORPORATION:**

\_\_\_\_\_  
**GRANTEE SIGNATURE**

\_\_\_\_\_  
**DATE**

Zachery Meyer, President

\_\_\_\_\_  
**PRINTED NAME AND TITLE OF AUTHORIZED GRANTEE SIGNATORY (above)**

**DEPARTMENT OF HEALTH:**

\_\_\_\_\_  
**SUSAN R. COOPER, MSN, RN, COMMISSIONER**

\_\_\_\_\_  
**DATE**

**APPROVED:**

**DEPARTMENT OF FINANCE AND ADMINISTRATION:**

\_\_\_\_\_  
**M. D. GOETZ, JR., COMMISSIONER**

\_\_\_\_\_  
**DATE**

# CONTRACT SUMMARY SHEET

021406

<b>RFS #</b>	<b>Contract #</b>
<b>343.52-677-06</b>	<b>FA-06-16851-02</b>
<b>State Agency</b>	<b>State Agency Division</b>
TENNESSEE DEPARTMENT OF HEALTH	HEALTH SERVICES ADMINISTRATION
<b>Contractor Name</b>	<b>Contractor ID # (FEIN or SSN)</b>
Ceridian LifeWorks d/b/a LEAD HEALTH, INC. <i>CORPORATION</i>	<input type="checkbox"/> C- or <input checked="" type="checkbox"/> V- 41-1981625-00

<b>Service Description</b>			
TOBACCO QUITLINE			
<b>Contract BEGIN Date</b>	<b>Contract END Date</b>	<b>Subrecipient or Vendor?</b>	<b>CFDA #</b>
June 30, 2006	June 30, 2007	Vendor	93.283

<b>Mark Each TRUE Statement</b>					
<input checked="" type="checkbox"/> Contractor is on STARS			<input checked="" type="checkbox"/> Contractor's Form W-9 is on file in Accounts		
<b>Allotment Code</b>	<b>Cost Center</b>	<b>Object Code</b>	<b>Fund</b>	<b>Funding Grant Code</b>	<b>Funding Subgrant Code</b>
343.52	150	139	11		
<b>FY</b>	<b>State</b>	<b>Federal</b>	<b>Interdepartmental</b>	<b>Other</b>	<b>TOTAL Contract Amount</b>
2007	\$ 195,630.00	\$ 239,104.00			\$ 434,734.00
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
<b>TOTAL:</b>	\$ 195,630.00	\$ 239,104.00	-	\$ -	\$ 434,734.00

<b>— COMPLETE FOR AMENDMENTS ONLY —</b>			<b>State Agency Fiscal Contact &amp; Telephone #</b>
<b>FY</b>	<b>Base Contract &amp; Prior Amendments</b>	<b>THIS Amendment ONLY</b>	CRYSTAL ALLEN (615) 741-9419
2007	\$ 434,734.00	\$ -	<b>State Agency Budget Officer Approval</b>
			<i>Crystal Allen</i>
			<b>Funding Certification</b> (certification, required by T.C.A., § 9-4-5113, that there is a balance in the appropriation from which the obligated expenditure is required to be paid that is not otherwise encumbered to pay obligations previously incurred)
<b>TOTAL:</b>	\$ 434,734.00	\$ -	
<b>End Date</b>	6/30/2007	6/30/2011	

<b>Contractor Ownership</b> (complete only for base contracts with contract # prefix: FA or GR)			
<input type="checkbox"/> African American	<input type="checkbox"/> Person w/ Disability	<input type="checkbox"/> Hispanic	<input checked="" type="checkbox"/> Small Business
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input checked="" type="checkbox"/> NOT disadvantaged
<input type="checkbox"/> OTHER minority/disadvantaged—			

<b>Contractor Selection Method</b> (complete for ALL base contracts— N/A to amendments or delegated authorities)			
<input type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation	<input type="checkbox"/> Alternative Competitive Method	
<input checked="" type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Negotiation w/ Government (eg, ID, GG, GU)	<input type="checkbox"/> Other	

<b>Procurement Process Summary</b> (complete for Alternative Method, Competitive Negotiation, Non-Competitive Negotiation, OR Other)
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The Grantee was originally selected based upon it's reponse to a Request for Proposal (RFP) issued by the Department of Health for Tobacco Quitline Services.

MAY 0 2007

# CONTRACT SUMMARY SHEET

021406

<b>RFS#</b>	<b>Contract#</b>
<b>343.52-677-06</b>	<b>FA-06-16851-01</b>
<b>State Agency</b>	<b>State Agency/Division</b>
TENNESSEE DEPARTMENT OF HEALTH	HEALTH SERVICES ADMINISTRATION
<b>Contractor Name</b>	<b>Contractor ID # (FEIN or SSN)</b>
The Mulvihill Group, Inc., d/b/a Leade Health, Inc.	<input type="checkbox"/> C- or <input checked="" type="checkbox"/> V- 38-2965012-00

<b>Service Description</b>			
Tobacco Quitline			
<b>Contract BEGIN Date</b>	<b>Contract END Date</b>	<b>Subrecipient or Vendor?</b>	<b>CFDA #</b>
June 30, 2006	June 30, 2007	vendor	93.283

<b>Mark Each TRUE Statement</b>					
<input checked="" type="checkbox"/> Contractor is on STARS			<input checked="" type="checkbox"/> Contractor's Form W-9 is on file in Accounts		
<b>Allotment Code</b>	<b>Cost Center</b>	<b>Object Code</b>	<b>Fund</b>	<b>Funding Grant Code</b>	<b>Funding Subgrant Code</b>
343.52	150	139	11		
<b>FY</b>	<b>State</b>	<b>Federal</b>	<b>Interdepartmental</b>	<b>Other</b>	<b>TOTAL Contract Amount</b>
2007	\$ 195,630.00	\$ 239,104.00			\$ 434,734.00
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
<b>TOTAL</b>	\$ 195,630.00	\$ 239,104.00	\$ -	\$ -	\$ 434,734.00

COPY

<b>COMPLETE FOR AMENDMENTS ONLY</b>			<b>State Agency Fiscal Contact &amp; Telephone #</b>
<b>FY</b>	<b>Base Contract &amp; Prior Amendments</b>	<b>THIS Amendment ONLY</b>	CRYSTAL ALLEN (615) 741-9419
2007	\$ 456,219.00	\$ (21,485.00)	<b>State Agency Budget Officer Approval</b>
			<i>Crystal Allen / BAP</i>
			<b>Funding Certification</b> (certification required by T.C.A. § 9-2-5113 that there is a balance in the appropriation from which the obligated expenditure is required to be paid that is not otherwise encumbered to pay obligations previously incurred)
<b>TOTAL</b>	\$ 456,219.00	\$ (21,485.00)	
<b>End Date</b>	6/30/2007	6/30/2007	

<b>Contractor Ownership</b> (complete only for base contracts with contract #, prefix FA or GR)					
<input type="checkbox"/> African American	<input type="checkbox"/> Person w/ Disability	<input type="checkbox"/> Hispanic	<input checked="" type="checkbox"/> Small Business	<input type="checkbox"/> NOT disadvantaged	
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input type="checkbox"/> OTHER minority/disadvantaged—		
<b>Contractor Selection Method</b> (complete for ALL base contracts; N/A to amendments or delegated authorities)					
<input checked="" type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation		<input type="checkbox"/> Alternative Competitive Method		
<input type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Negotiation w/ Government (eg. ID, GG, GU)		<input type="checkbox"/> Other		

<b>Procurement Process Summary</b> (complete for Alternative Method, Competitive Negotiation, Non-Competitive Negotiation, OR Other)	
<p>The Grantee has been selected based upon its response to a Request for Proposal (RFP) issued by the Department of Health for Tobacco Quitline Services.</p> <p style="text-align: right;">NOV 2 2 2006</p>	

NOV 18 2006

NOV 15 2006

# CONTRACT SUMMARY SHEET

021406

<b>RFS#</b>	<b>Contract#</b>
343.52-677-06	FA-06-16857-00
<b>State/Agency</b>	<b>State/Agency Division</b>
TENNESSEE DEPARTMENT OF HEALTH	HEALTH SERVICES ADMINISTRATION
<b>Contractor Name</b>	<b>Contractor ID# (FEIN or SSN)</b>
The Mulvihill Group, Inc., dba Leade Health, Inc.	C- or <input checked="" type="checkbox"/> V- 38-2965012-00

<b>Service Description</b>			
Tobacco Quitline			
<b>Contract BEGIN Date</b>	<b>Contract END Date</b>	<b>Subrecipient or Vendor?</b>	<b>CFDA #</b>
30-Jun-06	30-Jun-07	vendor	93.283

<b>Mark Each TRUE Statement</b>	
<input checked="" type="checkbox"/> Contractor is on STARS	<input checked="" type="checkbox"/> Contractor's Form W-9 is on file in Accounts

Allocation Code	Cost Center	Object Code	Fund	Funding Grant Code	Funding Subgrant Code
343.52	150	139	11		
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount
2007	\$ 206,219.00	\$ 250,000.00			\$ 456,219.00
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
<b>TOTAL</b>	\$ 206,219.00	\$ 250,000.00	\$ -	\$ -	\$ 456,219.00

<b>COMPLETE FOR AMENDMENTS ONLY</b>			<b>State/Agency Fiscal Contact &amp; Telephone#</b>
<b>FY</b>	<b>Base Contract &amp; Prior Amendments</b>	<b>THIS Amendment ONLY</b>	CRYSTAL ALLEN - (615) 741-9419
			<b>State/Agency Budget Officer Approval</b>
<b>TOTAL</b>	\$ -	\$ -	
<b>End Date</b>			

<b>Contractor Ownership (complete only for base contracts with contract prefix FA or GR)</b>			
<input type="checkbox"/> African American	<input type="checkbox"/> Person w/ Disability	<input type="checkbox"/> Hispanic	<input checked="" type="checkbox"/> Small Business
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input type="checkbox"/> NOT disadvantaged
			<input type="checkbox"/> OTHER minority/disadvantaged

<b>Contractor Selection Method (complete for ALL base contracts - N/A to amendments or delegated authorities)</b>			
<input checked="" type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation	<input type="checkbox"/> Alternative Competitive Method	
<input type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Negotiation w/ Government (eg, ID, GG, GU)	<input type="checkbox"/> Other	

<b>Procurement Process Summary (complete for Alternative Method, Competitive Negotiation, Non-Competitive Negotiation, OR Other)</b>
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The Grantee has been selected based upon its' response to a Request for Proposal (RFP) issued by the Department of Health for Tobacco Quitline Services.

**PROCESSED**  
JUL 17 2006

DIRECTOR OF ACCOUNTS



**GENERAL ASSEMBLY OF THE STATE OF TENNESSEE  
FISCAL REVIEW COMMITTEE**

320 Sixth Avenue, North – 8<sup>th</sup> Floor  
NASHVILLE, TENNESSEE 37243-0057  
615-741-2564

**Rep. Charles Curtiss, Chairman**

**Representatives**

Harry Brooks	Mary Pruitt
Curt Cobb	Donna Rowland
Dennis Ferguson	David Shepard
Frank Niceley	Curry Todd
Craig Fitzhugh, <i>ex officio</i>	
Speaker Jimmy Naifeh, <i>ex officio</i>	

**Sen. Don McLeary, Vice-Chairman**

**Senators**

Mae Beavers	David Fowler
Jim Bryson	Steve Southerland
Steve Cohen	
Douglas Henry, <i>ex officio</i>	
Lt. Governor John S. Wilder, <i>ex officio</i>	

**M E M O R A N D U M**

**TO:** The Honorable Dave Goetz, Commissioner  
Department of Finance and Administration

**FROM:** Charles Curtiss, Chairman *CC*  
Don McLeary, Vice-Chairman *DM*

**DATE:** September 14, 2006

**SUBJECT:** **Contract Comments**  
(Contract Services Subcommittee Meeting 9/12/06)

**RFS# 343.52-677**

**Department: Health**

**Division: Health Services Administration**

**Contractor: The Mulvihill Group, Inc. DBA Leade Health, Inc.**

**Summary:** The vendor is currently responsible for the establishing and operating a statewide toll free telephone based system to assist tobacco users to quit. This is a one-year contract with a term beginning June 30, 2006, and ending June 30, 2007, with the option to extend the contract in one-year increments for a total of five years. This amendment revises the service unit/milestone rates and advances the date of the first benchmark from July 14, 2006, to August 4, 2006.

**Maximum liability for original one-year term: \$456,219**

**Maximum liability with amendment: \$456,219**

**Maximum liability if extended for five years: \$1,071,094**

After review, the Fiscal Review Committee voted to recommend approval of the contract amendment.

**cc:** The Honorable Kenneth Robinson, M.D., Commissioner  
Mr. Robert Barlow, Director, Office of Contracts Review